APR 2 3 2004

maye EX+ (1mth)

STORES (2) 5

Approved for use through 04/30/2003. OMB 0551-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Proconcident duction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Requ st For Continued Examination (RCE) Transmittal

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450A

d to a collection of information u	nless it displays a valid OMB control number.	_
Application Number	09/936,289	
Filing Date	September 12, 2001	
First Named Inventor	Taizo SATO	
Group Art Unit	2679	
Examiner Name	Sikha ROY	
Attorney Docket Number	SATO=22	

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 C.F.R. 1.114 does not apply to any utility or plat application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to USPTO) on page 2.

a.	1. Submission required under 37 C.F.R. § 1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).						
i. Amendment/Reply ii. Information Disclosure Statement (IDS) ii. Affidavit(s)/Declaration(s) iii. Information Disclosure Statement (IDS) iii. Affidavit(s)/Declaration(s) iv. Other 2. Miscellaneous a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months: Fee under 37 CFR 1.17(n) required). b. Other 3. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when RCE is filed. a. The director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 02-4035 ii. RCE fee required under 37 CFR 1.17(e) iii. Cherch in the amount of \$ 0.1 FC:1801 iii. Other b. Check in the amount of \$ 0.1 FC:1801 iii. Other c. Check in the amount of \$ 0.1 FC:1801 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. d. Provisional extension of time if needed. Applicants authorize any ortarge of additional fees (except issue fee) which may be required in connection with this application to Deposit Account No. 02-4035. SIGNATURE OF APPLICANT, ATTORNEY, AGENT REQUIRED Name (Print/Type) Anne My Kombayl Registration No. (Attomsy/Agent) 25,884 Signature CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Name (Print/Type) Registration No. (Attomsy/Agent)							
i. Amendment/Reply ii. Information Disclosure Statement (IDS) ii. Affidavit(s)/Declaration(s) iii. Information Disclosure Statement (IDS) iii. Affidavit(s)/Declaration(s) iv. Other 2. Miscellaneous a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months: Fee under 37 CFR 1.17(n) required). b. Other 3. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when RCE is filed. a. The director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 02-4035 ii. RCE fee required under 37 CFR 1.17(e) iii. Cherch in the amount of \$ 0.1 FC:1801 iii. Other b. Check in the amount of \$ 0.1 FC:1801 iii. Other c. Check in the amount of \$ 0.1 FC:1801 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. d. Provisional extension of time if needed. Applicants authorize any ortarge of additional fees (except issue fee) which may be required in connection with this application to Deposit Account No. 02-4035. SIGNATURE OF APPLICANT, ATTORNEY, AGENT REQUIRED Name (Print/Type) Anne My Kombayl Registration No. (Attomsy/Agent) 25,884 Signature CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Name (Print/Type) Registration No. (Attomsy/Agent)	i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on March 31, 2004						
i. Amendment/Reply ii. Information Disclosure Statement (IDS) ii. Affidavit(s)/Declaration(s) iv. Other 2. Miscellaneous a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months: Fee under 37 CFR 1.17() required). b. Other 3. Fees The RCE tee under 37 C.F.R. § 1.17(s) is required by 37 C.F.R. § 1.114 when RCE is filed. a. The director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 02-4035 ii. RCE fee required under 37 C.F.R. 1.17(e) iii. Extension of time fee (37 C.F.R. 1.136 and 1.17) iii. Other b. Check in the amount of \$							
ii. Affidavit(s)/Declaration(s) iv. Other 2. Miscellaneous a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months: Fee under 37 CFR 1.17(i) required). b. Other 3. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when RCE is filed. a. The director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 02-4035	b. 🛛 Enclosed			· · · · · - ·			
2. Miscellaneous a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months: Fee under 37 CFR 1.17(i) required). b. Other 3. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when RCE is filed. a. The director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account, No. 02-4035 i. RCE fee required under 37 CFR 1.17(e) ii. Extension of time fee (37 CFR 1.136 and 1.17) iii. Other b. Check in the amount of \$	i. 🛛 Amendm	ent/Reply iii.	Informat	ion Disclosure Statement	(IDS)		
a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months: Fee under 37 CFR 1.17(i) required). b. Other 3. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when RCE is filed. a. The director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 02-4035 04/26/2604 SZENDIE1 00000033 09936289 i. RCE fee required under 37 CFR 1.17(e) 01 FC:1801 770.00 0P ii. Extension of time fee (37 CFR 1.138 and 1.17) (\$	ii. Affidavit(s	s)/Declaration(s) iv.	Other				
months. (Period of suspension shall not exceed 3 months: Fee under 37 CFR 1.17(i) required). b. Other The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when RCE is filed. a. The director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account, No. 02-4035 i. RCE fee required under 37 CFR 1.17(e) ii. Extension of time fee (37 CFR 1.13s and 1.17) iii. Other b. Check in the amount of \$	2. Miscellaneous						
Dither	a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of						
3. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when RCE is filed. a. The director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 02-4035 i. RCE fee required under 37 C.F.R. 1.17(e) ii. Extension of time fee (37 C.F.R. 1.136 and 1.17) iii. Other b. Check in the amount of \$							
a. The director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 02-4035 i. RCE fee required under 37 CFR 1.17(e) ii. Extension of time fee (37 CFR. 1.138 and 1.17) iii. Other b. Check in the amount of \$							
Deposit Account No. 02-4035 i. RCE fee required under 37 CFR 1.17(e) ii. Extension of time fee (37 CFR. 1.136 and 1.17) iii. Other b. Check in the amount of \$							
ii. Extension of time fee (37 CFR. 1.136 and 1.17) (\$ already paid for month(s) extension of time on) iii. Other b. Check in the amount of \$							
iii. Check in the amount of \$	i MRCE fee required under 37 CER 1 17(a)						
b. Check in the amount of \$ enclosed (Check No) c. Credit card (Form PTO-2038 enclosed) authorized in the amount of \$ 770.00 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. d. Provisional extension of time if needed. Applicants authorize any charge of additional fees (except issue fee) which may be required in connection with this application to Deposit Account No. 02-4035. SIGNATURE OF APPLICANT, ATTORNEY, AGENT REQUIRED Name (Print/Type) Anne M. Rombay Registration No. (Attorney/Agent) 25,884 Signature Date April 23, 2004 CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Name (Print/Type) Registration No. (Attorney/Agent)	= · VI FC:1001 //V.00 UP						
C. Credit card (Form PTO-2038 enclosed) authorized in the amount of \$ 770.00 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. d. Provisional extension of time if needed. Applicants authorize any charge of additional fees (except issue fee) which may be required in connection with this application to Deposit Account No. 02-4035. SIGNATURE OF APPLICANT, ATTORNEY, AGENT REQUIRED Name (Print/Type) Annelly Rombay: Registration No. (Attomsy/Agent) 25,884 Date April 23, 2004 CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Name (Print/Type) Registration No. (Attomsy/Agent)	iii. Other						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. d. Provisional extension of time if needed. Applicants authorize any charge of additional fees (except issue fee) which may be required in connection with this application to Deposit Account No. 02-4035. SIGNATURE OF APPLICANT, ATTORNEY, AGENT REQUIRED Name (Print/Type) Anne M. Kombay Registration No. (Attorney/Agent) 25,884 Signature Date April 23, 2004 CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Name (Print/Type) Registration No. (Attorney/Agent)	b. Check in the amount of \$ enclosed (Check No)						
be Included on this form. Provide credit card information and authorization on PTO-2038. d. Provisional extension of time if needed. Applicants authorize any charge of additional fees (except issue fee) which may be required in connection with this application to Deposit Account No. 02-4035. SIGNATURE OF APPLICANT, ATTORNEY, AGENT REQUIRED Name (Print/Type) Anne M. Kombay Registration No. (Attorney/Agent) 25,884 Signature Date April 23, 2004 CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Registration No. (Attorney/Agent)							
SIGNATURE OF APPLICANT, ATTORNEY, AGENT REQUIRED Name (Print/Type) Anne M. Kornbay Registration No. (Attorney/Agent) 25,884 Signature Date April 23, 2004 CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Name (Print/Type) Registration No. (Attorney/Agent)	WARNING: Information on this form may become public. Credit card information should not						
SIGNATURE OF APPLICANT, ATTORNEY, AGENT REQUIRED Name (Print/Type) Anne M. Kornbay Registration No. (Attorney/Agent) 25,884 Signature Date April 23, 2004 CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Name (Print/Type) Registration No. (Attorney/Agent)	, <u> </u>						
Name (Print/Type) Anne M. Kombay Signature CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Registration No. (Attorney/Agent) Registration No. (Attorney/Agent)							
CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Name (Print/Type) Registration No. (Attorney/Agent)	SIGNATURE OF APPLICANT, ATTORNEY, AGENT REQUIRED						
CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Name (Print/Type) Registration No. (Attorney/Agent)	Name (Print/Type)	Anne M. Kombay	Registrati	On No. (Attorney/Agent)	25,884		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Name (Print/Type) Registration No. (Attorney/Agent)	Signatur ,	, CAN	Date	April 23, 2004			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Name (Print/Type) Registration No. (Attorney/Agent)	OFFICIAL OF MAILING OF TRANSMISSION						
envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below. Name (Print/Type) Registration No. (Attorney/Agent)							
Name (Print/Type) Registration No. (Attorney/Agent)	envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the						
Signature Date			Registrati	ON NO. (Attorney/Agent)			
·	Signature		Date				

This collection of information is required by 37 CFR 1.114. The information is required to obtain one retain a benefit by the public which is to file (and by the USPTO to 0.4/30/cprocess) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you of the province of the chief information officer, U.S. Patent and Trademark Office, U.S. Perpartment of Commerce, P.O. Box.1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1460.

If you need assistance in completing this form, cell 1-800-PTO-9199 and select option 2.